

TRIPURA GAZETTE



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PART -- II Advertisements and Notices

BEFORE THE NOTARY PUBLIC
AGARTALA : WEST TRIPURA
AFFIDAVIT

Annexure-1

FORMAT OF AN AFFIDAVIT FOR TRIPURA STATE GOVERNMENT EMPLOYEE FOR CHANGE OF NAME/SURNAME.

BY THIS AFFIDAVIT I the undersigned **SMT GOURI RANI LODH PAUL**, W/O-Sri Amal Chandra Paul, resident of Barjala, P.O-Barjala, P.S.-West Agartala, Dist-West Tripura, lately called **SMT GOURI LODH PAUL** (Formal name) employed as STAFF NURSE, (Designation of the post held at the time by the Govt. servant) at Bamutia Primary Health Centre, Health Department, P.O- Bamutia, P.S-Lefunga, Dist-West Tripura in the Health Department, Govt. of Tripura (place where employed in the Department/Office of the State Government) do hereby.

1. Wholly renounce, relinquish and abandon on the use of my former name of **SMT GOURI LODH PAUL** and in place thereof do assume from the date thereof the name of **SMT GOURI RANI LODH PAUL** and so that I may hereafter be called, known and distinguished not by my former name of **SMT GOURI LODH PAUL** but by my assumed name of **SMT GOURI RANI LODH PAUL**.
2. For the purpose of evidencing such my determination, declare that I shall at all times hereafter in all records, deeds and writings and in all proceedings, dealings and transactions private as well as public and upon all occasions whatsoever use and sign the name of **SMT GOURI RANI LODH PAUL** as my name in place of and in substitution for my former name of **SMT GOURI LODH PAUL**.
3. Expressly authorizes and request all persons at all times hereafter to designate and address me by such assumed name of **SMT GOURI RANI LODH PAUL**.
4. In witness whereof I have here unto subscribed my former and adopted name of **SMT GOURI LODH PAUL & SMT GOURI RANI LODH PAUL** affixed my seal this 6th day of February, 2023.

The Contents of the Affidavit are read over and Explained to the Deponent/Deponents. The Deponent / Deponents has / have Acknowledge the contents and Has/Have signed/put the thumb impression in this Affidavit and He/She/They are identified by me.

Debi Smita Chakraborty
Advocate.
6/2/23

Gouri Rani Lodh Paul

Old Signature *George Lodd Paul*

New Signature *George Rane Lodd Paul*

Signed and delivered by the above

Named.....

Formerlyin the presence of :-

Witness No-1.

Signature *Sanghamitra Dhar*

Name *Drl. Sanghamitra Dhar*

Designation *MEDICAL OFFICER, Gr-IV, of THS*

Official Address..... *Bamutia P.H.C.*

(with Rubber Stamp)

*Medical Officer,
Bamutia P.H.C.
Tripura (W).*

Witness No-2

Signature *Mausumi Hader*

Name *Drl. Mausumi Hader*

Official Address..... *Medical officer, Gr-II, PHS*

(with Rubber Stamp) *Bamutia P.H.C.*

On 06/02/2023
SANANDA CHAKRABORTY
NOTARY Govt. of Tripura,
Agartala, West Tripura,
Regd. No.-47 of 2021

I identify by me
Debigmitra Chakraborty

Adr. 6/2/23